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PTO/SB/01 (10-00)
Approved for use through 10/31/2002. OMB 0651-0032
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| | | |
|---|-------------------------------|--|
| DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) | Attorney Docket Number | PHUS030171US |
| | First Named Inventor | CHMIELEWSKI, Thomas |
| | COMPLETE IF KNOWN | |
| | Application Number | |
| | Filing Date | |
| | Group Art Unit | |
| <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing | OR | <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required) |
| | Examiner Name | |

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

CONNECTION SYSTEM FOR SPLIT-TOP RF COILS

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) [] as United States Application Number or PCT International Application Number [] and was amended on (MM/DD/YYYY) [] (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

| Prior Foreign Application Number(s) | Country | Foreign Filing Date (MM/DD/YYYY) | Priority Not Claimed | Certified Copy Attached? | |
|-------------------------------------|---------|----------------------------------|--------------------------|--------------------------|--------------------------|
| | | | | YES | NO |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| | | | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

| Application Number(s) | Filing Date (MM/DD/YYYY) | <input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto. |
|-----------------------|--------------------------|--|
| 60/478,296 | June 13, 2003 | |

[Page 1 of 2]

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DECLARATION — Utility or Design Patent Application

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| | | |
|--|-------------------------------|-------------------------|
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| City Cleveland | State Ohio | ZIP 44143 |
| Country US | Telephone 440-483-4281 | Fax 440-483-4874 |

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR : ☐ A petition has been filed for this unsigned inventor

| | | | |
|---|--|-------------------|-----------------------|
| Given Name (first and middle [if any]) Thomas | Family Name or Surname CHMIELEWSKI | | |
| Inventor's Signature <i>Thomas Lundin</i> | Date 6/30/03 | | |
| Residence: City Willoughby Hills | State Ohio | Country US | Citizenship US |
| Mailing Address 2901 Hemlock Drive | | | |
| Mailing Address | | | |
| City Willoughby Hills | State Ohio | ZIP 44094 | Country US |

NAME OF SECOND INVENTOR: ☐ A petition has been filed for this unsigned inventor

| | | | |
|--|---|-------------------|-----------------------|
| Given Name (first and middle [if any]) John T. | Family Name or Surname CARLON | | |
| Inventor's Signature <i>John T. Carl</i> | Date 6/30/03 | | |
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| Mailing Address | | | |
| City Madison | State Ohio | ZIP 44057 | Country US |

☐ Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

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CHANGE OF CORRESPONDENCE ADDRESS Application

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| | |
|------------------------|--------------------|
| Application Number | unknown |
| Filing Date | herewith |
| First Named Inventor | Thomas CHMIELEWSKI |
| Art Unit | unknown |
| Examiner Name | unknown |
| Attorney Docket Number | PHUS030171US |

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I am the:

- ☐ Applicant/Inventor
- ☐ Assignee of record of the entire interest.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).
- ☒ Attorney or agent of record. Registration Number 48,979
- ☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number _____

Signature

Tom Lundin

Typed or Printed
Name

Thomas M. Lundin

Date December 9, 2005

Telephone

440-483-4281

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

This collection of information is required by 37 CFR 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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